

to their medical advisers and say, "Doc., I'm feeling fine, now I want you to tell me how I can go on feeling fine". Now this might seem to be wasting good diagnostician's time, but it is not so. The real situation is brilliantly laid bare in the first of the nine papers in this book written by Dr. Robert Logan, Reader in Social Medicine in the University of Manchester. Dr. Logan points out that the lines between therapy, prophylaxis and prevention, are becoming blurred and that new concepts and new approaches are needed to cope adequately with the situation. The salient features of this is what Dr. Logan calls the "submerged iceberg" aspect of disease. His findings show that in an average practice of about 2,250 patients, for every twenty-four females known and treated for anaemia, there will be about 162 whose condition is neither recognized nor treated. Combined comparisons in respect of hypertensive disease, urinary infections, glaucoma, epilepsy, rheumatoid arthritis, cancer of breast and cervix, together with psychiatric and suicidal conditions, reveal that, while the whole number of such patients in an average practice will total about 746, less than 200 will usually be diagnosed and treated. But it is precisely the cases which are comprehended in this "submerged iceberg" of disease which offer the most promising possibilities concerning not only cure and palliation, but even more of prophylaxis and prevention. If complaints like the writer's present bronchitis can be ameliorated before it reduces its victims to wheezing puffing billies whose life (if you could call it that) will only be preserved by skilled nursing and expensive antibiotics, we should all be happier, and, what is very much to the point, more productively fit and far less of a debit in the astronomically soaring budget of the N.H.S.

Space precludes discussion of the other eight important papers by various authors in this highly informative book which every parliamentary and local government candidate should read.

This matter of the "submerged iceberg" is of immense interest to students of eugenics. For genetic disease, so much of which is present in heterozygous, recessive form, fits the specification par excellence. How may we study and

detect it, as the indispensable preliminary to rooting it out by measures involving genetic counselling, voluntary sterilization, and (mention it not in Lambeth Palace) even by invoking the principle of what Professor Sheldon elegantly terms "semi adoption"! which turns out to be our old friend "euteleogenesis" and Professor Muller's "voluntary choice of germinal material" in disguise. But here the reviewer must stop, lest this should develop into a book itself calling for someone to review.

HERBERT BREWER

PSYCHIATRY

Timms, Noel. *Psychiatric Social Work in Great Britain (1939-1962)*. London, 1964. Routledge and Kegan Paul. Pp. ix + 270. Price 32s.

FROM SMALL AND tentative beginnings, thirty-five years ago, with seventeen founder members, this newest branch of social work can now point to a register of 965 fully-qualified associates, a distinguished list of past presidents including Sir Aubrey Lewis, a journal of international standing, forty-eight regional branches, and an influential position among professional social work organizations in the country. How this growth has come about, and how it reflects and interacts with developments in social policy, is ably documented by Noel Timms, himself a psychiatric social worker and lecturer to the Mental Health Course at the London School of Economics. His assiduous collection and collation of historical facts, together with analyses of data pertaining to selection and employment, and a singularly lucid exposition of the aims, skills and practice of the profession, must clear up any lingering confusion about what a psychiatric social worker is and does.

Much of the book, inevitably, is mainly of interest to those concerned with the training of these specialized social workers and with their future deployment in the mental health services. Mr. Timms does not hesitate to tackle the problem which faces all social work organizations at the present time: how to maintain standards of selection and training when the demand far outruns the supply? Nor does he fail to deal (and convincingly) with the oft-heard criticism that the emphasis given in student training to psycho-analytic theory and long-

term treatment of cases is irrelevant to the conditions in which most P.S.W.s will subsequently work.

In the early days of the Association, career choices for members lay mainly between mental hospital and child guidance clinic, where psychiatrists and psychologists were available for consultation and support. Since the War, however, the scope and diversity of careers has widened; and although almost two-thirds of currently employed P.S.W.s are still to be found in the traditional fields, there is a marked trend towards more adventurous posts in administration, University teaching, probation, child care, work with local authorities, etc. Community care mental health services, with their emphasis on keeping the patient at home, had in 1963 attracted ninety-eight full-time P.S.W.s to this new field (an attraction reinforced by the higher salary scales which these Local Authority posts can command). Research, alas, appeals to few (only fifteen were so employed in 1963). Mr. Timms relates this in part to the absence of teaching on research method in the training courses, to the many other demands on the average worker's time, and to the lack of career posts and continuity. As this reviewer can testify, the existing hand-to-mouth position between one grant and the next is indeed a major disincentive to those who wish to devote themselves to research.

Other topics of more than sectional interest are discussed by Mr. Timms: the effect of the recruitment of men to the profession, the predominance of London and the South in the distribution of employment, the influence which the association has had on social legislation by the informed evidence it has submitted to Governmental Committees and Commissions. As a sociological study of the emergence and growth of a professional group, this book is a model of its kind; even more valuable is the contribution Mr. Timms has made to the philosophy of social work in the contemporary scene.

MOYA WOODSIDE

CONTRACEPTION

Cornish, Mary Jean, Ruderman, Florence A. and Spivak, Sydney S. *Doctors and Family Planning*.

New York, 1963. National Committee on Maternal Health, Inc. Publication No. 19. Pp. 100. Price \$2.00. No charge for reasonable quantities to schools, libraries and nonprofit organizations.

IN JUNE 1937, the American Medical Association gave its official endorsement to birth control. Although some physicians had supported it, the medical profession had, officially, been less than co-operative in spite of Margaret Sanger's repeatedly expressed conviction that physicians should be responsible for providing contraceptive information and advice. The present study is based on the interviewing of 551 practising physicians in 1957 to discover just what role was in fact played by the doctors twenty years later. Each interview lasted about an hour and a half, and the doctors selected were in practice in three particular pairs of communities—two cities, two groups of towns and two rural areas, "approximately matched on social and economic characteristics . . . but varying in the proportion of Catholics within each pair." One of the "High Catholic Towns" was of special significance being in a State "in which giving information about or prescribing contraception is illegal."

Quite evidently the work was carried out with great care and nearly 40 per cent of the report consists of appendices on methodology. The Questionnaire, which is printed in full, reminds us that 1957 was still in the pre-pill age: there is no mention of oral contraception, nor of intra-uterine devices. The reader of the report is reminded perhaps of a strained Ph.D. thesis in which excessive effort has been made to leave nothing out.

This survey does not produce a figure, but quotes Freedman, Whelpton and Campbell, to the effect that 85 per cent of "white American women in the childbearing years . . . have used or intend to use some birth-control measure." Worthy of quotation are the three "themes" which are listed in the report's Summary:

The first general theme . . . is that *the extent and kind of family-planning information . . . depends on what a patient requests and on what each doctor believes appropriate rather than on any definition by the profession of what a doctor should do.*

The second general theme . . . is that *when patients do request advice on control of conception,*